



**GUIDANCE COUNSELOR FORM: THIS FORM MUST BE COMPLETED BY CANDIDATE'S HIGH SCHOOL GUIDANCE COUNSELOR OR PRINCIPAL FOR CONGRESSIONAL NOMINATION TO ONE OF THE UNITED STATES SERVICE ACADEMIES**

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Telephone Number of School: \_\_\_\_\_

Applicant's Year in School: \_\_\_\_\_ Class Rank: \_\_\_\_\_ of \_\_\_\_\_

Actual G.P.A.: \_\_\_\_\_ Weighted G.P.A.: \_\_\_\_\_

S.A.T. Scores: Verbal: \_\_\_\_\_ Math: \_\_\_\_\_

A.C.T. Scores: \_\_\_\_\_

Leadership Characteristics:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Personality Traits:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Ability to Work Under Pressure:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

General Comments/Recommendation:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN THIS COMPLETED FORM AND A CURRENT TRANSCRIPT TO THE APPLICANT SO THAT IT MAY BE SUBMITTED TO THE DISTRICT OFFICE OF CONGRESSMAN JAMES R. LANGEVIN BY OCTOBER 31. (IF OCTOBER 31 FALLS ON THE WEEKEND, APPLICATIONS ARE DUE THE FOLLOWING MONDAY.)**